



**(701) 328-3900 or (800) 803-7377 • Fax: (701) 328-3920**

**ORIGINAL TO NDPERS – PLEASE MAKE A PHOTOCOPY FOR YOUR RECORDS**

## INSTRUCTIONS AND CONDITIONS

**IMPORTANT NOTICE** - This form is to be used only for North Dakota Public Employees Retirement System Benefit Payments.

If you wish your monthly benefit payments sent to your financial organization for deposit into your savings or checking account, both you and the financial organization must complete this form to authorize this action. The North Dakota Public Employees Retirement System will forward these payments to the point you authorize. The financial organization may be any bank, savings bank, savings and loan association or similar institution, or Federal or State chartered credit union.

**THIS FORM ONLY AUTHORIZES DEPOSITS INTO YOUR ACCOUNT.  
IT DOES NOT AUTHORIZE WITHDRAWALS FROM YOUR ACCOUNT.**

### **PART A        ANNUITANT / PAYEE SECTION**

**LINE 1** – Print or type the full name and social security number of the person to whom the payment is made.

**LINE 2** – Print the mailing address of the payee named in Line 1. Provide a complete address including zip code

**LINE 3** – Provide Day Time Phone Number

**LINE 4** – Check the type of account and print account number for the account in which this payment is to be deposited

**LINE 5** - Sign and date the form

### **PART B        FINANCIAL INSTITUTION SECTION**

After completing the top portion of this form, the form should be delivered or sent to the designated financial institution. Upon completion, you and the financial institution should retain a photocopy for your records and the original is to be sent to:

North Dakota Public Employees Retirement System  
P.O. Box 1657  
Bismarck, ND 58502-1657  
Telephone: (701) 328-3900

### **CANCELLATION INSTRUCTIONS**

When entered in your record with the North Dakota Public Employees Retirement System, this authorization will remain in effect until canceled by written notice by you to the North Dakota Public Employees Retirement System, or in the event of your death. The financial organization should also be notified if you cancel this agreement.

The financial organization may cancel their agreement by providing you a written notice 30 days in advance of the cancellation date. You must advise the North Dakota Public Employees Retirement System if this authorization is canceled. The financial organization cannot cancel this authorization by advice to the North Dakota Public Employees Retirement System.

### **FINANCIAL INSTITUTION**

Immediate credit will be given the first working day of each month through your correspondent bank account at the Bank of North Dakota.